Herscher Community Unit School District No. 2

DR. RICHARD S. DECMAN, SUPERINTENDENT SHELLY PARSONS, SPECIAL SERVICES DIRECTOR PETE FALK, CURRICULUM DIRECTOR

PARENT CONSENT for PARTICIPATION, ASSUMPTION of RISK & RELEASE

Please read this form carefully and be aware that participation in the athletics/activities program(s) for which your child is being registered entails, such as participation in all recreational activities, certain risks which cannot be entirely eliminated despite due care exercised by Herscher Community Unit School District #2 staff in conjunction with such program(s).

I hereby give my consent for the below-named child to participate in the athletic/ activities program(s). I understand that appropriate precautions are taken to protect program participants. However, I also recognize and acknowledge that there is a degree of risk that my child may sustain personal injury, illness or damage to property in the course of partaking in such activities, and that Herscher Community Unit School District #2 cannot guarantee risk-free recreational experiences to program participants. I further acknowledge that my child could be exposed to someone who may be incubating communicable illnesses or other diseases, including but not limited to COVID-19 (Coronavirus), and who may be capable of spreading said disease to others during participation. I nonetheless desire to procure the benefits of recreation for my child, and accordingly consent to his/her participation in the program and agree to assume any and all risks and dangers associated with his/her participation.

I agree to emergency treatment of my child by a physician or hospital in the event I cannot be reached, and I understand that Herscher Community Unit School District #2 does not cover or insure participants for any types of medical costs.

I hereby fully release and discharge Herscher Community Unit School District #2 and it's officers, agents, servants and employees from any and all claims from injury, illness, disease, damage, loss or death which I may have or which may accrue on account of my child's participation in this program(s). I further agree to indemnify and hold harmless Herscher Community Unit School District #2 and it's officers, agents, servants and employees from any and all claims and expenses, including attorney's fees, resulting from injury, illness, disease, damage, loss or death sustained and arising in any way out of my child's participation in said programs.

Student Name:	24	Student's Date of Birth:	
Parent/Guard	lian Acknowledg	ement and Agreement:	
Parent/Guardian Printed Name	e:		
Parent/Guardian Signature:		Date:	
			7-2020

"Education...The Ultimate Investment."